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JoAnn Villami			reby certify that thi	s Fee(s) Transmittal is bein	g deposited with the United		
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Tarrytown, NY	10591					// (Signature)	
	·		 	man		(Signature)	
SUNG DUTE			`	arch 20,	2009		
APPLICATION NO.	FILING DATE	L	FIRST NAMED INVENTOR		ATTORNEY DOCKET NO.	CONFIRMATION NO.	
10/542,852	07/21/2005		Adolf Kaser	62/22/2666	PD/3-22827/A/PCT	9185 1935 10542852	
TITLE OF INVENTION: LIQUID PREPARATION OF A COPPER PHIHALOCYANINE DYE							
				01 FC:1501			
				02 FC:1504 03 FC:8001			
APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE		DATE DUE	
nonprovisional	NO	\$1510	\$300	\$0	\$1810	05/18/2009	
EXAMINER		ART UNIT	CLASS-SUBCLASS]			
KHAN, AMINA S		1796	008-661000				
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(1) the names of up to 3 registered patent attorneys '							
Address form PTO/SB/122) attached. (2) the name of a single firm (having as a member a 2							
"Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.			registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.				
3. ASSIGNEE NAME A	ND RESIDENCE DATA	A TO BE PRINTED ON	THE PATENT (print or ty	pe)			
PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.							
(A) NAME OF ASSIGNEE (B) RESIDE				E: (CITY and STATE OR COUNTRY)			
Ciba Specialty Chemicals Corp. Tarrytown, NY							
Reel: 017483 Frame: 0544 Recorded: January 23, 2006							
Please check the appropriate assignee category or categories (will not be printed on the patent): Individual Corporation or other private group entity Government							
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				ase first reapply an	y previously paid issue fee	shown above)	
Issue Fee			☐ Payment by credit card. Form PTO-2038 is attached.				
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a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.							
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		animan			h 20, 2009		
Authorized Signature JoAnn Villamizar					o. 30,598		
Typed or printed nam	le /					II d Horro	
an application. Confiden submitting the complete this form and/or suggest	itiality is governed by 35 d application form to the ions for reducing this bu /irginia 22313-1450. DC	U.S.C. 122 and 37 CFR USPTO. Time will vary rden, should be sent to the	1.14. This collection is es depending upon the indivite Chief Information Office	timated to take 12 n vidual case. Any cor er. U.S. Patent and	Frademark Office, U.S. Der	In d by the USPTO to process) and gathering, preparing, and ime you require to complete partment of Commerce, P.O. for Patents, P.O. Box 1450,	

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omplete and send this form, together with applicable fee(s), to: Mail Mail Stop ISSUE FEE Commissioner for Patents P.O. Box 1450 MAR 2 3 2009 Alexandria, Virginia 22313-1450 or <u>Fax</u> (571)-273-2885 form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as prected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for RUCTIONS: maintenance fee notifications. Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission. CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address) 02/18/2009 324 Certificate of Mailing or Transmission I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below. JoAnn Villamizar Ciba Corporation/Patent Department 540 White Plains Road P.O. Box 2005 Maddalena Tarrytown, NY 10591 (Signature) FILING DATE FIRST NAMED INVENTOR ATTORNEY DOCKET NO. CONFIRMATION NO. APPLICATION NO. PD/3-22827/A/PCT 07/21/2005 Adolf Kaser 9185 10/542.852 TITLE OF INVENTION: LIQUID PREPARATION OF A COPPER PHTHALOCYANINE DYE PUBLICATION FEE DUE PREV. PAID ISSUE FEE SMALL ENTITY ISSUE FEE DUE TOTAL FEE(S) DUE DATE DUE APPLN. TYPE NO \$1510 \$300 \$1810 05/18/2009 nonprovisional ART UNIT CLASS-SUBCLASS **EXAMINER** 1796 008-661000 KHAN, AMINA S 1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). 2. For printing on the patent front page, list Tyler A. Stevenson (1) the names of up to 3 registered patent attorneys ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to ☐ "Fee Address" indication (or "Fee Address" Indication form 2 registered patent attorneys or agents. If no name is listed, no name will be printed. PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required. 3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment. (B) RESIDENCE: (CITY and STATE OR COUNTRY) (A) NAME OF ASSIGNEE Ciba Specialty Chemicals Corp. Tarrytown, NY Reel: 017483 Frame: 0544 Recorded: January 23, 2006 Please check the appropriate assignee category or categories (will not be printed on the patent): 🔲 Individual 🗵 Corporation or other private group entity 🔲 Government 4a. The following fee(s) are submitted: 4b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above) Issue Fee Publication Fee (No small entity discount permitted) Payment by credit card. Form PTO-2038 is attached. The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any Advance Order - # of Copies 4 overpayment, to Deposit Account Number 03-1935 (enclose an extra copy of this form). 5. Change in Entity Status (from status indicated above) ☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2). ☐ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the reports of the United States Patent and Trademark Office. Date March 20, 2009 Authorized Signature Registration No. 30,598 oAnn Villami

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